Independent Citizens Redistricting Commission

Application Review and Quality Control Sheet

Applicant Name: THOMAS VANDYKE		
Date Received: <u>62/22/26/3</u>	Applicant Number: _/८	365
Recommended Applicant Pool Status: Final Applicant Poo		ool Status:
☐ Included ☐ Removed	Included	Removed
REQUIREMENTS:		
Was the application received before the subm	nission deadline?	☑Yes □No
If NO, list time/date application was receiv	ed:	
2. Is the application complete? If NO, list the item(s) that need to be comp		☑Yes ☐No
ij No, iist the reem(s) that need to be comp	reteu.	
3. Indicate how the applicant responded to the f	ollowing questions:	
A. Student enrolled in a college/university in	the City of Austin?	□Yes □No
If YES, consider I and ii only; If NO, consider	l, ii, iii, and iv:	
i. Reside in the City of Austin?		☐Yes ☐No
ii. Registered to vote in the City of A	ustin?	✓ Yes
iii. Continuously registered to vote in	the City of Austin?	☑Yes ☐No
iv. Voted in 3 of the last 5 City of Aus	tin general elections?	Yes No
Follow-up needed related to REQUIREMENTS?		□Yes ☑No
If YES, identify issue(s) addressed and dispo		

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CONFLICTS OF INTEREST:

4.	Did the applicant respond "Yes" to any conflict of interest of If YES, indicate which question(s):	questions?
*	Follow-up needed related to CONFLICTS OF INTEREST? If YES, identify issue(s) addressed and disposition:	□Yes □No
CC	DNSISTENCY:	
5.	Are applicant answers consistent? If NO, indicate which answer(s):	☐Yes ☐No
*	Follow-up needed related to CONSISTENCY? If YES, identify issue(s) addressed and disposition:	□Yes □No
Ap	uality Control Review By:	Review Date: 62/25/2013
	ellow-up Contact(s) Reviewed By:	